



PTO/SB/21 (08-03)

## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

|  |  |                        |                 |
|--|--|------------------------|-----------------|
|  |  | Application Number     | 10/632,698      |
|  |  | Filing Date            | August 1, 2003  |
|  |  | First Named Inventor   | Staple, Bevan   |
|  |  | Art Unit               | 1762            |
|  |  | Examiner Name          | Not yet known   |
| Total Number of Pages in This Submission |  | Attorney Docket Number | 019930-002310US |

### ENCLOSURES (Check all that apply)

|  |   |  |
|--|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form                     | <input checked="" type="checkbox"/> Formal Drawings (9 sheets)                          | <input type="checkbox"/> After Allowance Communication to Group                            |
| <input type="checkbox"/> Fee Attached  | <input type="checkbox"/> Licensing-related Papers                                       | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences        |
| <input type="checkbox"/> Amendment/Reply                                     | <input type="checkbox"/> Petition   | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final   | <input type="checkbox"/> Petition to Convert to a Provisional Application               | <input type="checkbox"/> Proprietary Information   |
| <input type="checkbox"/> Affidavits/declaration(s)                           | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input type="checkbox"/> Status Letter   |
| <input type="checkbox"/> Extension of Time Request                           | <input type="checkbox"/> Terminal Disclaimer  | <input checked="" type="checkbox"/> Other Enclosure(s)<br>(please identify below):         |
| <input type="checkbox"/> Express Abandonment Request                         | <input type="checkbox"/> Request for Refund   | PTO Copy of Notice to File Missing Parts Return Postcard                                   |
| <input checked="" type="checkbox"/> Information Disclosure Statement         | <input type="checkbox"/> CD, Number of CD(s)  |  |
| <input type="checkbox"/> Certified Copy of Priority Document(s)              |   |  |
| <input type="checkbox"/> Response to Missing Parts/ Incomplete Application   |   |  |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 |   |  |
| Remarks  |   | The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.   |

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

|                    |  |  |
|--------------------|--|--|
| Firm or Individual | Townsend and Townsend and Crew LLP<br>Patrick M. Boucher |  |
|                    | Reg. No. 44,037  |  |
| Signature          |  |  |
| Date               | December 30, 2003  |  |

### CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Missing Parts, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

|                       |                 |      |                   |
|-----------------------|-----------------|------|-------------------|
| Typed or printed name | Nina L. McNeill |      |                   |
| Signature             |                 | Date | December 30, 2003 |